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TRENDS IN CARDIAC REHABILITATION REFERRAL RATES FOR PATIENTS UNDERGOING PERCUTANEOUS CORONARY INTERVENTION: INSIGHTS FROM THE BMC2 REGISTRY

ACC Poster Contributions

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Background: Despite the known benefits of cardiac rehabilitation in patients after myocardial infarction and/or revascularization, referral rates to rehabilitation programs remain low. We determined annual referral rates for patients undergoing percutaneous coronary intervention (PCI), and evaluated factors associated with increased or decreased likelihood of referral.

Methods: We assessed the prevalence and predictors of referral for cardiac rehabilitation among 145,661 consecutive patients undergoing PCI and surviving to hospital discharge across 31 hospitals participating in the Blue Cross Blue Shield of Michigan Cardiovascular Consortium between 2003 and 2008.

Results: The 6-year referral rate was 60.2%, with an increase in annual rates since 2003 (Figure 1). Patients older than 70 (OR = 0.88) and female patients (OR = 0.88) were less likely to be referred to rehabilitation programs (both $p < 0.001$). BMI > 25 (OR = 1.11), MI in the last 7 days (OR = 1.98), and need for emergency PCI (OR = 2.06) were associated with higher referral rates (all $p < 0.001$). Referred patients were more likely than their counterparts to be discharged on aspirin (98.0% v. 95.7%), clopidogrel (96.9% v. 95.3%), beta-blockers (87.6% v. 83.2%), statins (86.1% v. 79.5%), and ACE-inhibitors/ARBs (59.0% v. 55.3%) (all $p < 0.001$).

Conclusions: Over one-third of patients undergoing PCI are not referred for cardiac rehabilitation. Those referred appear more likely to receive optimal medical management at hospital discharge.

